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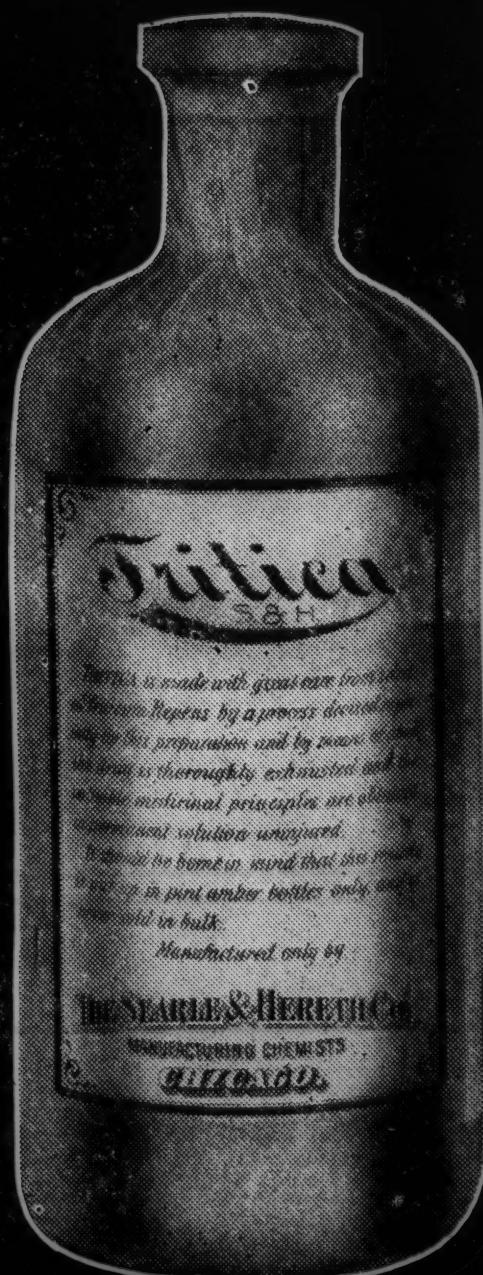
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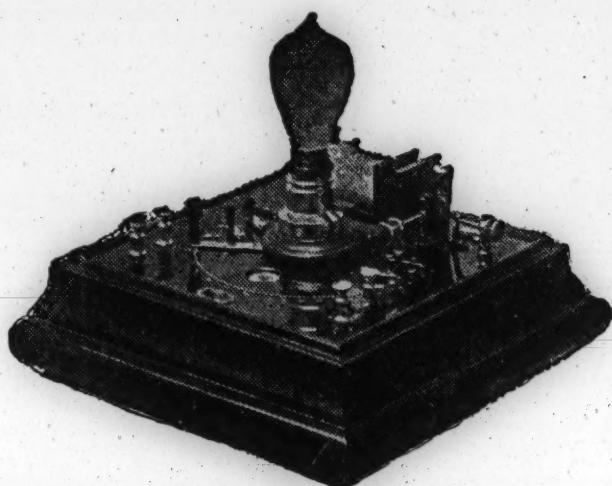
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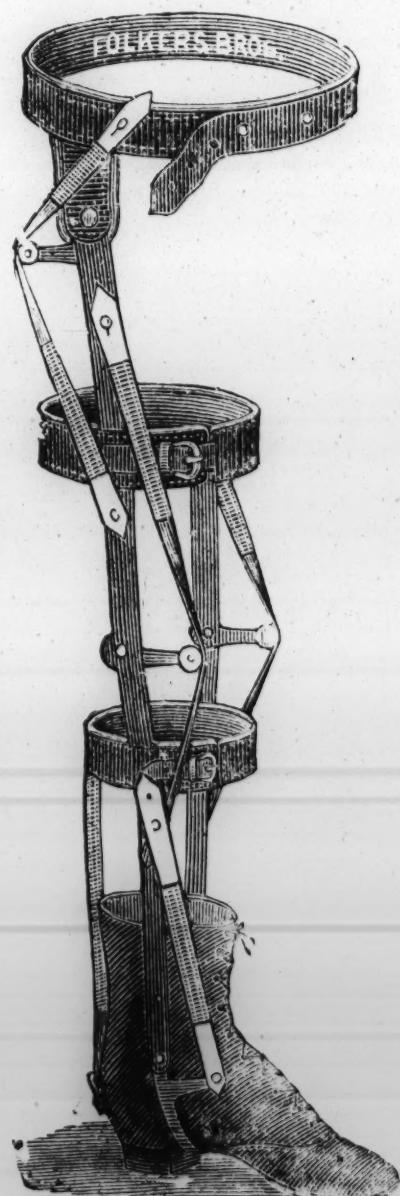
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CALIFORNIA MEDICAL JOURNAL.

Ecthol in Scarlet Fever.

By John M. Turk, M. D., Canton, Ga.

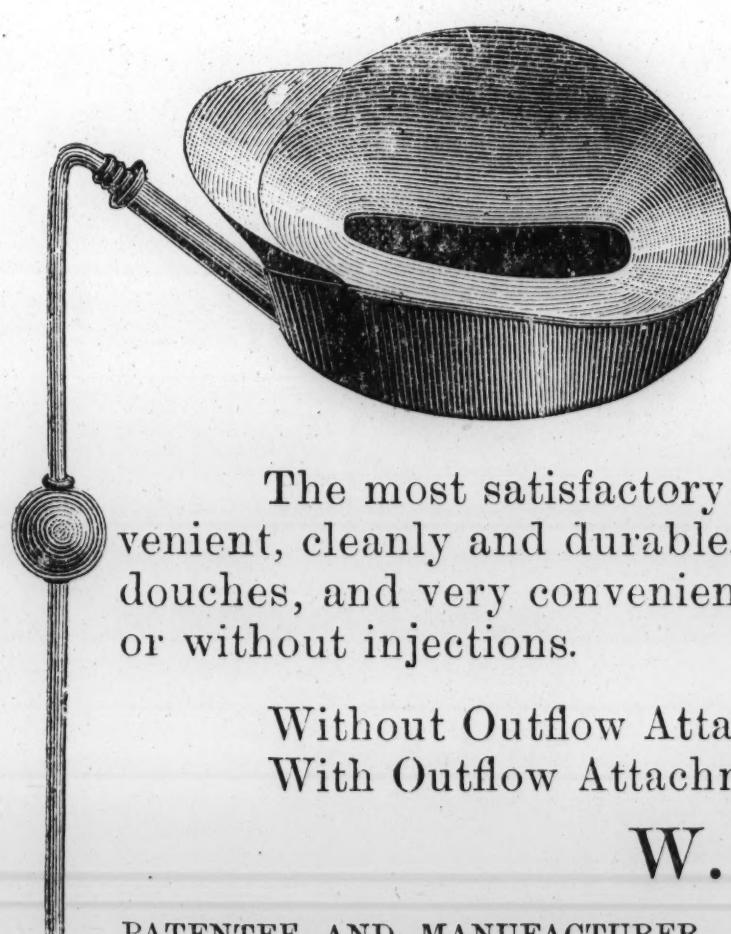
I feel called upon to say something plain and practical in regard to the usefulness of Ecthol in the above disease. I have used ecthol for one year in an epidemic of scarlet fever, and I must say that it has more than met my most sanguine expectations. It has accomplished more than any agent I have ever used in a practice of forty-three years. Ecthol robs scarlet fever of all the distressing sequels, such as nephritis, ear complications, adenitis, membranous angina, etc., if the remedy is given early enough and as often as every two or three hours, in bad cases, until desquamation is over, then not so often. A great many of my cases were malignant and quite a number ushered in with convulsions. In some of my

malignant cases I gave double the prescribed dose. It prevents in a large degree the disintegration of cellular tissue, and will not disappoint any who may use it in scarlet fever.—*New Orleans Medical and Surgical Journal*, May, 1902.

I have used your preparation for a number of years in my practice, both in adults and in children, in cases of anæmia, chlorosis, neurasthenia, and their sequelæ, with satisfactory results. The majority of patients preferred your preparation to other forms of iron on account of its very agreeable taste as well as convenient manner of administering Pepto-Mangan (Gude).

DR. EM. PICK.

Vienna, August 12, 1901.



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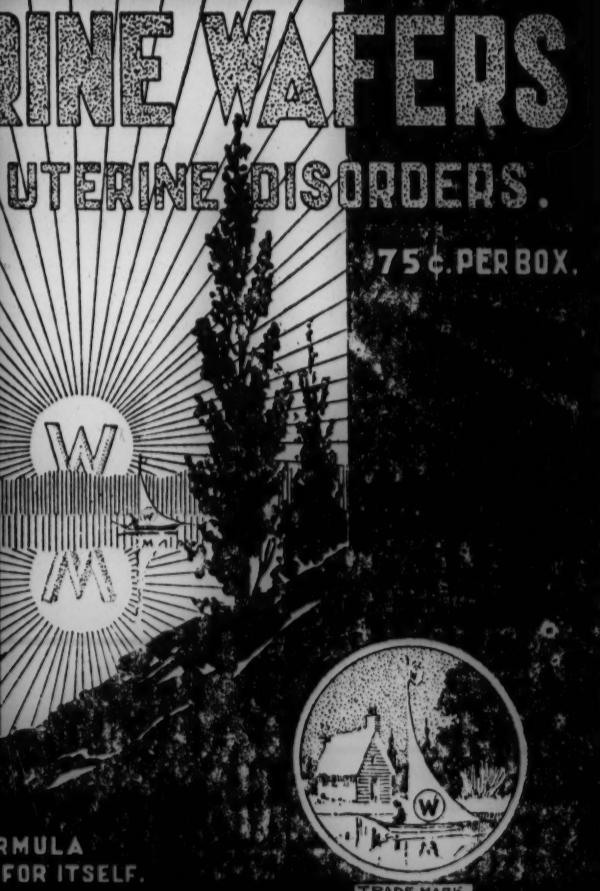
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CALIFORNIA MEDICAL JOURNAL.

Gelatin as a Hemostatic to the Stomach.

Mr. H. C. Wood, Jr., in *American Medicine*, concludes an article as follows:

"1. Pepsin digestion of gelatin does not destroy its coagulating effect on the blood. 2. The resulting product is dialyzable, and therefore capable of absorption. 3. The administration of gelatin by the mouth in the treatment of hemorrhage is, therefore, a rational procedure. 4. Gelatose seems to antagonize, if given in sufficient quantity, the anticoagulating action of peptone."

We have repeatedly called attention to the hemostatic quality of gelatin it brought directly in contact with bleeding surfaces. Given by the stomach or injected *per rectum* it ought to answer this purpose for the control of hemorrhage along the gastro-intestinal

tract, being given preferably by the rectum in hemorrhage from the colon, and both ways when in doubt as to its exact site.

Surgical Operations on Old People.

J. C. Sexton believes that it is disease and not years that makes people old. He contends that the shock of operation, pure and simple, is not a great factor in the surgery of the aged. The shock of blood loss is, and there are many who do not think there is very often any other kind of shock. It does not appear to be necessary to produce deep narcosis in old people. The extreme sensibility of the nervous system incident to the prime of life seems dulled in old age. Old people can endure a great deal and have the same right to surgical skill as any one else.—*Indiana Medical Journal*.

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CALIFORNIA MEDICAL JOURNAL.

Vol. XXIII.

SEPTEMBER, 1902.

No. 9.

Prostatic Hypertrophy And Methods Of Treatment.

DR. B. ROSWELL HUBBARD, LOS ANGELES, CAL.

A medical gentleman remarked to me some weeks ago that "it was his opinion that a large majority of old men, and in fact, men over fifty had, to some extent, enlarged prostates;" and to substantiate this opinion he cited numerous cases of urinary trouble, attended with tenesmus and deep perineal tenderness where daily massage of the gland with soothing remedial agents, brought about a marked change for the better.

I believe that many men at the age of sixty to seventy years have chronic hypertrophy of the prostate, although not every case where difficulty is experienced in voiding the urine, should be charged to this cause.

It must be remembered that in the advanced stages of life there is a general letting down of the tonicity of the system, both as to the nervous and muscular force. We notice the flabbiness of the muscular tissue, the wrinkled skin, the slowing down of the pulse, the tottering step, the functional irregularity of the bowels all

indication of functional weakness and a loss of nerve force.

When we study the structure and function of the bladder and prostate, we readily see, that owing to their immediate relationship, how a diseased or abnormal condition of one will reflect a structural or nervous disorder of the other.

The structure of the prostate being composed of muscular and glandular tissue is prone to take on interstitial hypertrophy, affecting in most part the posterior portion or middle lobe of the gland, worried into this condition, in the majority of cases, by chronic cystic derangements in elderly men the result of varied causes, not an uncommon one of which is the loss of expulsive power to completely evacuate the viscous during urination, always retaining a sufficient amount of urinary deposits to keep up one continuous irritation about the most dependent portion of the organ.

If this cause can be early recognized and the cystic derangement relieved

the prostatic disturbance will soon cease to be a source of inconvenience.

One of the early symptoms of this trouble is a hesitancy in urinating, and the old gentleman will consult his medical advisor for "the gravel" or some imaginary disease of kidneys or bladder. They will come with specimens of urine for examination for some evidence of calculi, and look with distrust upon the honesty and adroitness of the medical man should he fail to find it.

If they be well to do they are very likely to visit some of the many mineral springs of this or some foreign land, and in some cases, and to some extent relief will be obtained, but eventually, they will drift into the hands of the surgeon, who, if he be experienced in handling urinary ailments, will bring relief, but not alone with remedial agencies if the case be much advanced. I will wager that I but voice the opinion of the experienced surgeon, when I say, that medicine of whatever nature internally or externally applied will not bring about the desired result in any case of pronounced prostatic enlargement.

If a catheter can be introduced much relief can be obtained from washing out the bladder once or twice a day with a warm solution of salicylic acid and borax, ten grains of the former to one dram of the latter to the pint of warm water, by this means the viscous can be cleared of its sedimentary urine which is the prime factor in rendering the urine acrid and irritating. Where there is pronounced vesical tenderness with burning, one to two grains of

sulph. of hydrastis, or two drams of Lloyd's colorless hydrastis may be substituted for the salicylic acid.

Spc. tinc. of nux or nit. of strychnia may be administered both for its general and local tonic effect in broken down anæmic cases.

Massaging the prostate through the rectum has accomplished some good when properly executed, but it is not a popular method of cure with the physician or patient.

Retention of the urine resulting from a pronounced irritation about the prostate is often promptly relieved from the use of a rectal suppository containing powd. ext. of henbane $\frac{1}{20}$ gr. and sulph. of morphia $\frac{1}{4}$ gr.

We come now to consider the surgical relief for enlarged prostate, for, as I intimated above, this affection, if it be of long standing can be in the main cured only through surgical intervention.

Not many years ago the fact was observed by many eminent surgeons, among whom were: Hunter, Hutchinson, Owen and Oliver, that following castration of animals atrophy of the prostate ensued. Their observations led Prof. J. W. White of the medical department of the University of Pennsylvania, to further experiment along this line. His results were highly satisfactory and he earnestly advocates the removal of both testicles as the operative procedure in hypertrophy of this gland.

This method of procedure, like massage, while in a measure effective, is not a popular form of treatment for this trouble, for it is expected a man

would seriously object to being castrated unless positive assurance can be given him, that permanent relief can be obtained by the loss, but as a rule, the sufferer has quite outlived the period of sexual activity, and will be content with his remaining years as an *eunuch*, if he has the assurance of comparative comfort.

If the operator be an expert manipulator of graduated steel sounds, much relief may be given in the early stages of hypertrophy by their occasional use. In attempting their introduction as well as the metallic catheter, valued assistance can be rendered in directing the point of the instrument through the prostatic portion of the urethra by the finger in the rectum, pulling downward and outward thus straightening the urethral passage.

Some weeks ago I was hurriedly summoned to the bed-side of an old gentleman, the victim of an enlarged prostate, who had not voided his urine for twenty-four hours. His suffering was intense and he pleaded for relief. His physician had made repeated efforts to pass several makes of catheters but without success, except to cause an active hemorrhage. It was expected that I would tap the bladder to bring temporary relief, but with a finger in the rectum to straighten the urinary passage, I coaxed, by the impinging parts, a metallic catheter fashioned much after the English prostatic pattern causing but little pain in the procedure.

The resort to the use of the catheter to relieve a distended and worried bladder resulting from prostatic en-

largement is usually the first step in the way of surgical interference

Catheterization is to be commended only when the instrument can be introduced without inflicting pain; a variety of soft rubber instruments should be at hand. If we fail with one we may succeed with some other make. The catheter should be lubricated with olive oil or some medicated pomade and well sterilized after using; for this purpose Thiersch solution is advised, which is made as follows:

R Boracic acid crystals .3 iijs.

Salicylic acid crystals .3 j.

Sterilized water . . . fl. 3 xxxij.

The patient can be instructed to relieve himself by this means for a time, but eventually the introduction of the catheter becomes more and more difficult and painful when some of the favored operative procedures must be resorted to.

Perineal prostatotomy or section has its advocates, and while few cures are credited to this measure prompt relief is given to the aggravating cystitis usually met with. A permanent fistula is established for drainage. Its results are uncleanly, and the mortality five per cent. The operation is the same as for stone and done under thorough asepsis.

Suprapubic cystotomy with permanent drainage has nothing to commend it over the perineal section except, it gives the operator a better opportunity to examine the bladder, and aids in further operations upon the prostate, if the conditions warrant. A cure is not expected and the mortality is eight per cent. On account of the in-

ability to readily reach the prostate through a perineal section to operate with the finger, *perineal prostatectomy* is not considered a practical operative measure, and is discarded now in favor of executing the operative work through a suprapubic incision, which operation is perhaps more frequently resorted to than any other by surgeons of to day, for the removal of the hypertrophied growths of the gland, either by excision or enucleation, as the character of the individual case may direct.

The hemorrhage attending this work is sometimes quite profuse, and is controlled by packing with sterilized gauze, which may be preceeded by applications of hot water at a temperature of about 180° F. being as hot as the hand will tolerate. The mortality attending suprapubic incision, by skillful operators is about fifteen per cent.

Under general or local anæsthesia Bottini utilizes the galvano-cautery to furrow the projecting lobes of the gland. In selected cases, this operation executed by dexterous hands most excellent results have been obtained. This operation is quite effective and is commended by many of our foremost American surgeons. To attempt to execute this operative work, the surgeon must have a good battery and electrodes, especially designed for the purpose. I earnestly endorse this procedure not alone for its simple execution, but it gives the least percentage in mortality of any of the legitimate operations being about three per cent.

The technique of this operation is

as follows: After the bladder and urethra have been carefully cleansed with hot Thiersch solution, the viscus is comfortably filled with sterilized water. The patient now being anæsthetized, the electrode fashioned at the distal end with a moderate curve is introduced cautiously into the bladder. The beak or curve of the electrode is turned down or towards the rectum and withdrawn until it engages the enlarged prostate, the current is now turned on and the electrode so manipulated by the wheel at the end of the shaft, withdrawing the beak cutting a furrow through the floor of the gland. The current is then arrested and the beak of the electrode is reintroduced past the prostate and directed so as to engage the enlarged gland at nearly right angles with the first cut, and furrowed through as was the first. These manipulations are directed and facilitated by the finger in the rectum. After the third and last furrow is made the current is cut off and the electrode is pushed back into the contents of the bladder and allowed to cool before withdrawing it. It is advised to direct a stream of water from a fountain syringe through a catheter, to prevent destruction of the urethral tissue from the over-heated electrode during the time the current is on. It requires a current about forty-five amperes in strength to execute the work well.

The operative work completed, the sterilized water first thrown into the bladder is drawn off, and the organ thoroughly cleansed with a liberal quantity of quite warm Thiresch solution heretofore mentioned; this should



be repeated two or three times a day for a week or ten days, the catheter, preferably a lead one, remaining fastened in the bladder during this time.

Whichever of these operative procedures are resorted to for the relief and cure of prostatic hypertrophy, the results at all times will not prove satisfactory, because of the fact, that every form of palliative treatment will have

been given a trial ere the case comes to the surgeon. The patient's health at this time is broken down, he is nervous, anemic, and discouraged, a poor subject to undergo any kind of operative work. But, hope for any relief stimulates him to accept the inevitable and make the trial.

—Read before the Eclectic Medical Society of California, 1902.

Datura Stramonium.

W. H. HENDERSON, M. D., SACRAMONTO, CAL.

STAMONIUM in large doses is an energetic narcotic poison, causing dryness of the throat, difficult deglutition, nausea, giddiness, headache, dilatation of the pupil, disturbance of cerebral functions, loss of voice and maniacal delirium.

In medicinal doses it is anodyne, sedative, and antispasmodic.

It resembles in its remedial effects, belladonna, hyoscyamus and opium. In its cerebral actions it resembles belladonna, being indicated by enfeebled innervation, dilated pupils, sluggish circulation, constriction in the throat, but has more influence upon mental excitement than belladonna; and partakes of the qualities of hyoscyamus in the control of mental illusions and hallucinations, while it acts like opium as an anodyne-antispasmodic, but without causing constipation, or interfering with the action of the skin and kidneys, and will prove serviceable in cases where opium can-

not be given, and can be used for delirium, pains, aches, etc., to much better advantage.

In fevers attended by delirium, loquaciousness, or noisy raving, and with dilated pupils, it is a most appropriate remedy. In acute or chronic mania, puerperal insanity, or delirium tremens, with red or bloated face, when patient is wildly enraged, furious, and inclined to injure himself or those about him, In epilepsy associated with or followed by paroxysms of maniacal excitement, it will give relief and produce excellent results.

It is used in chorea, and hysteria, and both as an internal remedy and an inhalation to relieve asthma; the leaves dried and smoked, either alone or in varying proportions with tobacco are useful to relieve the paroxysms of spasmodic asthma.

It is to some extent an antidote to the opium habit, and if its use is persisted in, will in many cases effect a

cure; it should be given with a simple stimulant as compound spirits of lavender, or compound tincture of cardamom.

Externally a poultice of the fresh leaves bruised, will be found beneficial applied over the bowels in severe cases of enteritis, gastritis, and peritonitis.

An ointment made as follows: R extract stramonium, drams, j; white wax, ozs. ss; lard, ozs. jvss, alcohol, ozs. j; tinc. benzoin, drams, ss to j. Dissolve the extract in the alcohol, and the residue remaining in a little water, then add the wax and lard previously melted together and continue the heat to evaporate the alcohol and water, strain while hot, add the benzoin, and keep stirring until cold.

This forms an anodyne ointment, useful in many painful complaints. It will be found serviceable in irritable ulcers, burns, scalds, irritable cutaneous diseases, painful hemorrhoids, and as a discutient to indolent ulcers. Lloyd's Specific Medicine, or the above ointment, combined with dynamyne, and applied over the abdomen, will give great relief in peritonitis, enteritis, dysmenorrhœa, etc., applied to the perineum, in retention of urine from enlarged prostate, when a catheter could not be introduced, after some time it will be found that the catheter can be passed with ease, to the great relief of the patient, and the same result can also be obtained in urethral stricture. It is beneficial as a local application to swelled breasts, inflamed joints, sprains, bruises, inflammatory rheumatism, inflamed and swelled testicles, hemorrhoidal tumors and to

allay syphilitic, rheumatic, and neuralgic pains. The extract rubbed up with vaseline can be used rubbed upon the eyelids to dilate the pupil in place of belladonna, or a solution of the extract dropped into the eye is equally efficacious. Combined with quinine, stramonium increases its effects, and is exceedingly beneficial in intermittents, periodical pains, headaches, and in neuralgias. Stramonium is antagonistic to the poisonous effects of opium, and may be used as an antidote in poisoning from that drug.

Datura Stramonium commonly known as Thornapple, Jamestown, or Jimson-weed, belongs to the natural order of Solanaceæ.

This small order of perhaps not more than a dozen species west of the Sierra Nevada, and less than 70, in North America, is remarkable for the almost universal use by man of several of its species, and the diversity of properties exhibited by its members. The classification which places the wholesome tomato and deadly nightshade, insipid egg plant, and fiery cayenne pepper, nutritious potatoes, poisonous and ill-odored stramonium and tobacco, together in one family, at first glance would appear absurd; yet a careful examination shows that these seemingly very different plants are much alike after all. They are herbs, or shrubs, with alternate leaves and no stipules, regular 5—numerous flowers on bractless pedicels, a single style and a two-celled ovary; the fruit a many-seeded berry or capsule.

The four most important plants of the order—potato, tomato, tobacco and

red or cayenne pepper, are natives of tropical America, and were consequently not used in the Old World before the sixteenth century.

The native country of stramonium is unknown. It is found growing in Europe, Asia, Peru, Mexico, Canada, and all parts of the United States. It is a well known poisonous weed growing in waste grounds, along road-sides, etc., flowering from June to September; the officinal parts are the leaves and seeds, though almost every part of the plant is possessed of medicinal value. The leaves have a rank odor when fresh, especially if bruised, which is lost on drying, and an amarous, mawkish, nauseous taste; water, alcohol, and the fixed oils extract their properties; they should be gathered when the flowers are full-blown and carefully dried in the shade. The seeds are dark brown, or black, small

roughish, reniform and compressed odorless, similar in taste with the leaves, with some acridity. When bruised they give the same peculiar heavy odor of the leaves, they should be gathered when ripe.

Daturia obtained from stramonium seeds is considered identical with atropia, the chemical formula of each being practically the same; it is a very energetic poison, very minute quantities applied to the eye occasion protracted and excessive dilatations of the pupils.

Lloyd's Specific Stramonium will be found a very reliable preparation, and will give satisfaction in the proportion of drops five to ten to four ounces of water; mix, and give in doses of a tea-spoonful every half an hour to three hours as the urgency of the case demands.

—Read before State Eclectic Medical Society, May, 1902.

A Unique Case.

CHARLES MEALAND, M. D., SACRAMENTO, CAL

ON the 7th day of January, 1902, an unmarried lady, aged 23, came to my office for treatment. She stated that she had been troubled with dropsy several months, and that it was increasing so rapidly that both herself and mother were becoming alarmed at the progress. The effusion was general. I examined her heart and found it normal, and questioned her very closely. Not feeling satisfied I suggested that on her next visit her mother should accompany her.

In a few days she called again with her mother, when I found a diminution of the effusion. Functions were all normal excepting menstruation, which had not appeared for several months, but her mother informed me that she had always been irregular and it had often failed to appear for several months so that she attached no importance to its absence, but I did. I intimated to them my suspicion. Her mother coincided with me, yet she said she had questioned

her daughter and had received a most emphatic denial. The girl also in our presence stated that such a condition could not exist. She positively refused an examination, so I could neither confirm nor eradicate my suspicion of pregnancy. I treated her until the effusion had disappeared, yet the abdomen remained prominent and would not down, so I concluded that in a very short time the climax would be reached; the girl all the time most positively denied her true condition. On the morning of March 27th, at six o'clock, I was hurriedly called to her residence and there found a full term girl baby; the young lady was the most surprised person I ever saw. Her mother questioned her, and with tears she said, "Mama, if I knew anything about it I would tell you." I concluded to wait awhile and then question her myself; feeling that as the inevitable had happened she could not deny it. When she had recovered I asked her who was responsible for her trouble and she most positively declared that she had no knowledge whatever who was responsible. She did not know of anyone ever having taken any liberties with her. She said, "I do not know when, nor how, nor by whom it occurred, because never to my knowledge have I had anything to do with any man." I said, "You surely must have known you were pregnant, because the movement of the child would call your attention to the fact." She replied that she thought nothing of it and paid no attention to it, and did not know what it was. She is her mother's only companion, and her

mother has had ample opportunity of watching her daughter's behavior, and she says she has always been an exemplary and truthful girl. I suggested to the girl that perhaps she had been hypnotized or chloroformed, or that she had been given some potion, but she still earnestly affirms that none of these things ever happened and that the whole transaction is a mystery to her.

—Read before State Eclectic Medical Society, May, 1902.

A New Method of Making Milk Digestible.

Dr. Robert T. Edes gives a valuable method of preparing milk where other methods have not proved useful.

A pint of milk is gently warmed. Into it is dropped, very slowly and with constant stirring, about 20 minims of dilute hydrochloric acid. The milk should be stirred until it cools. In this way a very fine flocculent coagulum is produced, floating in the whey, which is easily accessible to the digestive secretions, while the whole fluid has lost somewhat of the fat and cloying taste which makes it unacceptable to so many. It will be noticed that milk prepared in this way differs from the various wheys in the highly important particular that the casein is retained and used, instead of being separated out as a distinct product, while it avoids the bitterness of pancreatinized milk.—*Dietetic and Hyg. Gazette.*

The new emergency hospital at Los Angeles will be opened September 1st.

TYPHOID FEVER

COMPETENT authorities agree that very little medication is required or is desirable in the treatment of this disease.

It is necessary to control the temperature of the patient and the best means of reducing dangerously high temperature is by repeated sponging of the body with tepid water, the use of the wet pack, or when the surroundings will permit, the employment of the full bath.

The alimentary canal should be kept in as nearly an aseptic condition as possible and this may be accomplished by the judicious administration of Zinc Sulpho Carbolate (the Merrell Company supply this remedy in the convenient form of 2, 3 and 5 grain tablets).

The greatest danger which threatens the patient is that of intestinal perforation and the remedy which will do more toward lessening this danger than any other is **SOLUTION BISMUTH AND HYDRASTIA**—Merrell.

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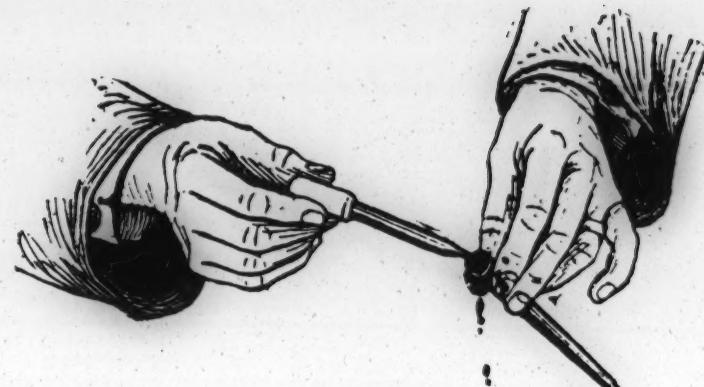
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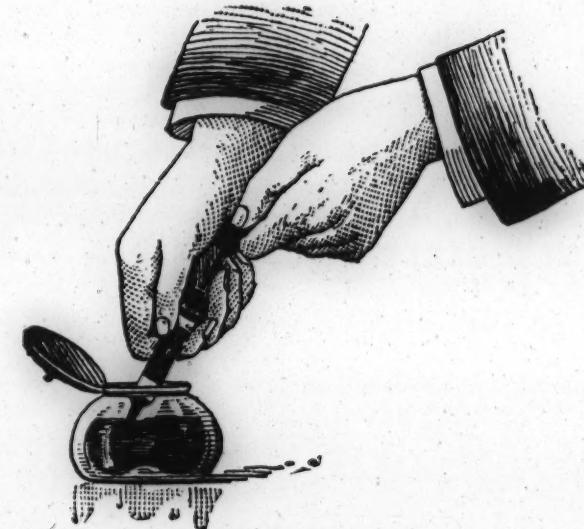
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Editorial Notes.

William O. Wilcox Bennett, '73, for many years Demonstrator of Anatomy in the California Medical College, died on August 14th, aged 52 years, after an illness of over two months. The cause of death was a septic infection resulting from work in the dissecting room, and though he made a brave fight against the poison, even his remarkable vitality could not avail.

The College has lost the ablest teacher of anatomy on the Coast. To the students he was more than a teacher, he was a friend. The profession has lost a physician whose affability and fairness in consultation was

especially appreciated by the younger men. He was never self-seeking and was incapable of advancing his own interests at the expense of others. The writer has lost a friend and preceptor whose guidance and wise advice have been of great practical value. The wife and family have lost a kind and indulgent husband and father, one whose first thought was for those dependent upon him and whose every serious consideration was to provide for their comfort. He will be missed by students, patients and friends as only such jovial, unselfish spirits are, but most of all by those who knew him in his home life.

Dr. Wilcox gained a large practice

in this city by reason of his genial disposition, and left an estate consisting of life insurance and Sonoma County realty which is estimated to be worth nearly ten thousand dollars. But the success or failure of any life cannot be measured by such a standard. One of his favorite expressions was, "Make life lighter," and to this principle he always adhered, instilling gaiety and animation into every assemblage, and dispelling the tears and gloom of a stricken home by his good natured badinage and earnest, sincere sympathy and optimism. The world is better that he has lived and that is the only true success.

Dr. L. D. Rink, one of our most valued contributors, died at his home in Selma, recently, aged 36 years. The cause of death was typhoid fever, and the deceased was ill only two weeks. In the death of Dr. Rink the profession of this State has suffered a distinct loss and our sympathy is extended to the bereaved family.

Dr. M. V. Higgins, '01, has removed from Cherokee and entered into partnership with Dr. Gates, of Oroville. They have finely equipped offices and should make a good team.

It is the duty of physicians to prevent substitution so far as possible by specifying the manufacturer on the prescription. Few druggists will dare to disregard this order.

We have several good country practices for sale, price for drugs, furniture, etc., ranging from \$150 to \$500 cash. We do not care to advertise

these locations but any inquiry will receive prompt attention.

Dr. C. N. Miller, '88, is now located at 313 Taylor street, between Ellis and O'Farrell, with hours 2 to 5.

The twenty-fifth annual announcement of the College will be mailed upon receipt of postal request. Every eclectic on the Coast should have a catalogue and be able to answer the questions of prospective students. Send us a list of High School graduates in your town.

A. B. Cook who had just completed his junior year in college died recently after a brief illness. Deceased was one of our brightest and most conscientious students.

FOR SALE.

A new 16 plate static machine with complete X-ray outfit, fluoroscope, ozone generator, etc. Delivered on the cars at San Francisco for \$170, spot cash. This is a big bargain as the machine has been in use only as agent's sample and is in perfect condition.

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An Ointment for Inflamed Nipples.

The *Hausdoktor* for March recommends this formula:

R Silver nitrate..... 10 grains
Bismuth subnitrate. 1 dram
Lanolin..... 1 ounce

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To be applied morning and evening after washing the nipples.—*N. Y. Med. Jour.*

Book Notes.

ALL BOOKS reviewed in these columns may be examined by prospective purchasers, at the JOURNAL Editorial rooms from 10 to 12 daily, within thirty days of the appearance of the review. We invite students to examine these publications. Publishers will please notify us of the net price of all books.

Diseases of the Eye—By G. E. de Schweinitz, A. M., M. D. Published by W. B. Saunders, Philadelphia. "The Emporium," San Francisco, Agents.

This is the third revised edition of Prof. de Schweinitz's excellent work, and much new matter has been introduced in accordance with the results of the more recent investigations. The relation of micro-organisms to ocular disease receives the attention which its importance deserves. It is especially a book for students and those beginning the study of ophthalmology as much space is devoted to optic principles and methods of examination. That portion devoted to operations is especially valuable as it sets forth the relative value of various methods and is amply illustrated. Very wisely the reader is not burdened by descriptive anatomy. The book is of convenient size and the text is so clear that the numerous illustrations seem almost superfluous. We heartily recommend students to procure this work.

Dorland's Medical Dictionary—Published by W. B. Saunders & Co., Phila. Price in flexible Morrocco cover, \$4.50; with thumb index, \$5.00. "The Emporium," Pacific Coast Agents, San Francisco.

There are several good medical dictionaries, well illustrated, and well bound, as such books should be, but Dorland's is the only one of such mod-

erate price and convenient form as to deserve the popularity which it has gained. It is not too large for the student to carry with him, and it is not so small as to be unsatisfactory as are most of the so-called "pocket dictionaries." The flexible covers make it possible to carry the book in a medium sized pocket, and render it better able to stand the rough usage to which such a book is subjected. Students will do well to purchase this book. It will last them throughout their college days and will never prove disappointing. Every practitioner needs a dictionary and when such a complete work of reference can be purchased for five dollars, why not get it?

Butler's Materia Medica—Published by W. B. Saunders & Co., Phila. "The Emporium," Pacific Coast Agents, San Francisco. Price \$4.00.

This is the third edition of Dr. Butler's work and it has been carefully revised much unimportant matter having been eliminated or condensed, and other drugs which have recently become useful have been more fully discussed. The author has been extremely conservative, giving but little or no attention to many drugs which seem to us to be worthy of mention at least, even in a work upon "regular" *materia medica*. We do not feel competent to criticise the text. It may cover the subject according to the knowledge and experience of the author, but we think it would prove insufficient for the young practitioner of to day. The pharmaceutical section is very good indeed, and the whole arrangement of the book is above criti-

cism, but the author evidently is suffering from a marked limitation of the visual field. Less space devoted to serum therapy and more to legitimate American medicinal plants is our suggestion for the next revision.

Special Pathology—By Dr. A. E. Thayer, of Cornell. Published by P. Blakiston, Son & Co., 1012 Walnut Street, Phila. Price 80 cents.

This is one of Blakiston's popular compends and is up to their usual standard. The text is lucid and well illustrated by thirty-four cuts, and it should be a very useful and convenient book for students and would not be out of place in the library of any practitioner.

The Year Books.

The numbers for June and July of this series of ten volumes are ready for delivery. The June number is devoted to Therapeutics, Preventive Medicine, Climatology and Forensic Medicine, and is edited by Drs. Butler, Favill Bridge and Moyer respectively.

The July number is devoted to Pediatrics and Orthopedic Surgery, under the charge of Drs. Christopher, Ridlon and Walker.

The series will be completed in September, and the physician who has the complete set will possess a very modern library made up of the latest ideas culled from the medical press of the world. The price for the entire set of ten volumes is \$7.50, or \$1.25 for each.

The Year Book Publishers, 40 Dearborn Street, Chicago,

The Removal of the Tonsils in Adults.

The removal of tonsils in adults is not the simple matter that it is in children. In a short paper on this subject Lack (Journal of Laryngology, October, 1901) advises caution on two accounts, hemorrhage and the effect on the voice. In the large fibrous pear-shaped tonsils sometimes met with he believes that serious hemorrhage may be expected in one out of three or four cases, if cutting instruments are used. With small tonsils the danger is less. The method to be employed for removal depends upon the case. The galvano cautery may safely be used for reducing the size of the tonsil, but it will not remove it. Tonsillotomy should not be done in adults with very large tonsils because of the danger of hemorrhage. The removal with the cautery snare has no advantage over other methods and leaves a bad wound, with danger of secondary bleeding. The cold wire snare or ecraseur, has great advantages in cases of much enlarged tonsils. It is more painful than cutting, but can often be done under cocaine. Lastly, enucleation is done by making an incision through the mucous membrane between the anterior pillar and the anterior border of the tonsil, through which the finger or blunt instrument is introduced and the tonsil shelled out of its bed. It is important to keep outside the tonsil capsule, this being but loosely attached to surrounding areola tissue. A general anesthetic is advisable. There is no risk of hemorrhage, the vessels being torn across

outside the tonsils, where they are healthy. The tonsil is completely removed—an important point in cases of frequently recurring tonsillitis or peritonsillar abscess.

In regard to the effect of the removal of the tonsils on the voice, the author has repeatedly met with cases in which a singing voice has been lost or the speaking voice weakened. The greater the enlargement and the longer the patient has accommodated himself to the condition, that is, the older he is, the greater the risk.—*The Boston Medical and Surgical Journal.*

The Effect of Mercury on the Unborn.

I have been practicing medicine and surgery for twenty-seven years, and I have observed during that time numerous confirmations of Stille's assertion that mercury is fatal to foetal life. "The eggs of crickets will not hatch near it. Hen's eggs put to hatch over mercury remained undeveloped, and chicks already in the eggs died." Heller of Vienna, reported two cases of impregnated women who aborted from mercurial inunction. In both cases mercury was detected in the bodies of the children. The whole population of Idria, where the ores of mercury are smelted, are subjected to the influence of the emanations. Mortality one in forty. Premature births and abortions are common.* * * Marriages among male and female operatives are productive of vastly more abortions, still-births and feeble children which seldom arrive at maturity, than those engaged in other pursuits.

Colson in his "Action of Mercury on the Uterus," says: "In not a few instances it has occasioned menorrhagia, and in pregnant females miscarriage. See "Calomel," page 753, Stille's Therapeutice and Mat. Med., vol. 2. On same page "Lize concluded that the constitutional action of mercury upon a husband alone or a wife alone, or upon both together, very commonly results in miscarriage, still-birth, or the premature death of the infant."—*Garrett Murphy, M.D., in Medical World.*

Garden City, Minn.

A New Method of Anchoring Kidney.

B. B. Davis, Omaha, reports a case in which he used the following procedure:

The incision extended from the lower rib to near the crest of the ilium, a hand's breadth to the right of the spinous processes of the vertebrae. The fatty capsule was reached just anterior to the outer border of the quadratus lumborum and was opened and a large part of it trimmed away. The kidney was pushed into place by a cylindrical pad placed under the abdomen.

When the kidney was well exposed, an incision was made through the proper capsule from 2 cm. below the upper pole to a point 2 cm. above the lower pole. This incision was placed vertically on the posterior surface near the convex border. The capsule was stripped loose from the kidney substance for a distance of three-fourths of an inch anteriorly and posteriorly to the incision in the capsule. From the upper and lower extremities of the

vertical incision a perpendicular incision three-fourths of an inch long was made through the capsule, this giving two flaps of capsule three-fourths of an inch wide by about two and one-half inches long.

Next a strip—the thickness of a little finger—of the other border of the quadratus lumborum muscle was split from the remainder of the muscle, the fibers being separated by the handle of the scalpel. This separation extended from the muscular attachment to the twelfth rib downward for two and one-half inches, or the slip in the muscle was made as long as the length of the capsular flaps before described.

An artery forceps was passed through the slit in the muscle, made to grasp the free border of the posterior flap of the kidney capsule and then withdrawn, bringing the flap of the kidney capsule through the slit in the muscle. The two capsular flaps were next brought together over the bundle of muscular fibers thus isolated from the border of the quadratus lumborum, and stitched together with a running suture of fine chromicized catgut, the needle being allowed to penetrate the muscular bundle at two or three places. The lumbar wound was next closed by tier sutures of catgut, the skin wound being closed with horsehair. Aside from a slight infection, the wound did well.

The patient never had a temperature above 99.4° was up on the twenty-second day and the kidney thus far is in place and the patient freed of her former symptoms. It is, of course, too early to predict the final results.

Indications for the Mastoid Operation.

Lee Wallace Dean states that mastoiditis is usually caused by an involvement of the membrane lining of the opening which connects the antrum of the mastoid with the middle ear. The swelling of the membrane occludes the opening from which there results stagnation of secretion in the cavities of the mastoid. If pyogenic micro-organisms develop in this secretion, mastoiditis takes place. Although in most cases of mastoiditis the characteristic symptoms are marked enough to make diagnosis comparatively easy, there are cases, especially those of tuberculous origin, in which all these symptoms may be absent, and yet there may be very extensive necrosis of the mastoid cells. This destruction may take place without any pain. When mastoiditis develops, it is best, in the beginning, to give laxatives and apply, by means of Leiter's tubes, cold over the region of the mastoid. If there is decrease in the intensity of the disease within two or three days, the treatment should be kept up. If, however, the disease becomes worse, or even remains at a standstill, or if symptoms of meningeal disturbance develop, operation should be performed without delay. The danger in mastoiditis lies not in the operation, but in not operating. There is little danger if the operation is performed under perfectly aseptic conditions; the patient will suffer little discomfort besides that which results from the anaesthesia. The patient may die as the result of the previous condition, but very few die as the result of the operation.—*Med. Record.*

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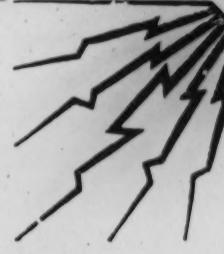
"During the recent summer, I believed I saved the life of a little negro boy by the use of Echatolta and this remedy alone. He was about four years old, and his surroundings were of the most unsanitary character and his nursing the poorest imaginable. In spite of these unfavorable conditions he recovered after an exhaustive disease lasting more than two months. The trouble began very much like a case of continued fever, but of a low type. He continued to get worse and about the second week experienced an alarming condition approaching collapse. The heart action became very feeble and intermittent. Following this depression came an exhaustive diarrhea of a choleraic character. I easily controlled this diarrhea with *rhus aromatic*a. At this juncture septic infection became evident and the lungs were involved with a pneumonia of quite pronounced severity. I then began administering ten-drop doses of Echafolta. This had the effect of mitigating the symptoms considerably, and in a few days his condition was so much improved that I stopped the remedy, and then the symptoms became greatly aggravated. I again resumed the Echafolta, when a complete change for the better took place, but it was followed by another profuse diarrhea and I discontinued the Echafolta and again controlled the diarrhea with *rhus aromatic*a. At this stage of the disease (third week) circumscribed, inflammatory swellings appeared on various parts of the body. These were sluggish, and, at first, quite painful, but soon developed into abscesses and would break spontaneously, discharging a sanguous and offensive pus. The abscesses continued throughout the course of the disease (ten weeks) and numbered at no time less than six, appearing chiefly near the joints, on the neck, in the groin, on the back and one on the scalp. Feeling convinced at the time that Echafolta was the only remedy administered that seemed to hold the disease in check, I put him on ten-drop doses every three hours and kept him on it until complete recovery took place. From what I observed in this case I believe that the boy could not have lived without the remedy, for whenever it was discontinued he became alarmingly worse, and whenever it was resumed, his condition became better so promptly that I could attribute it to no other cause. The boy to-day is strong and hearty and shows no ill effects of his serious illness."

H. W. FELTER, M. D., Cincinnati, Ohio.

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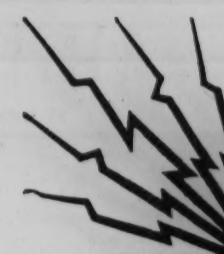
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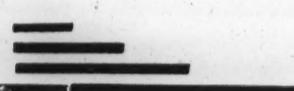
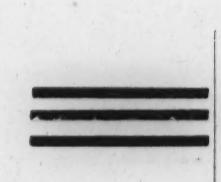
A Legal Decision Against Substitution.

Quite recently the proprietors of Gude's Pepto-Mangan won a suit in the United States Court, which they brought to prevent Henry Thayer & Co., from continuing to market an iron preparation in a terra-cotta colored package closely resembling that used by the plaintiff. Some of the testimony which was given by the officers of the defendant company throws an interesting light upon the moral and mental attitude of the substitutor. The treasurer of the company stated as his reason for adopting a terra-cotta colored package for his preparation of iron that this sort of a package was the fashion in iron preparations, and that in order to follow the "fashion" he adopted this particular color. The opinion held by

the court in the matter is shown in a verdict awarding the plaintiff substantial damages. It is a noteworthy fact that the "fashion" in new remedies is always set by some preparation in the production and exploitation of which large sums and much labor have been expended, and that this "fashion" is nearly always followed by scores of imitators who seek to profit by the enterprise, skill and knowledge of manufacturers with greater originality than themselves.

Skin Eruption in Malaria.

D. Riseman (*American Medicine*, March 22, 1902), says that skin eruptions are not rare in malarial infection, the most frequent being herpes and urticaria. Neither of these presents any specific character. Both may occur in any

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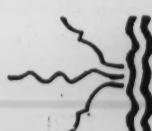
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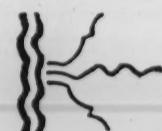
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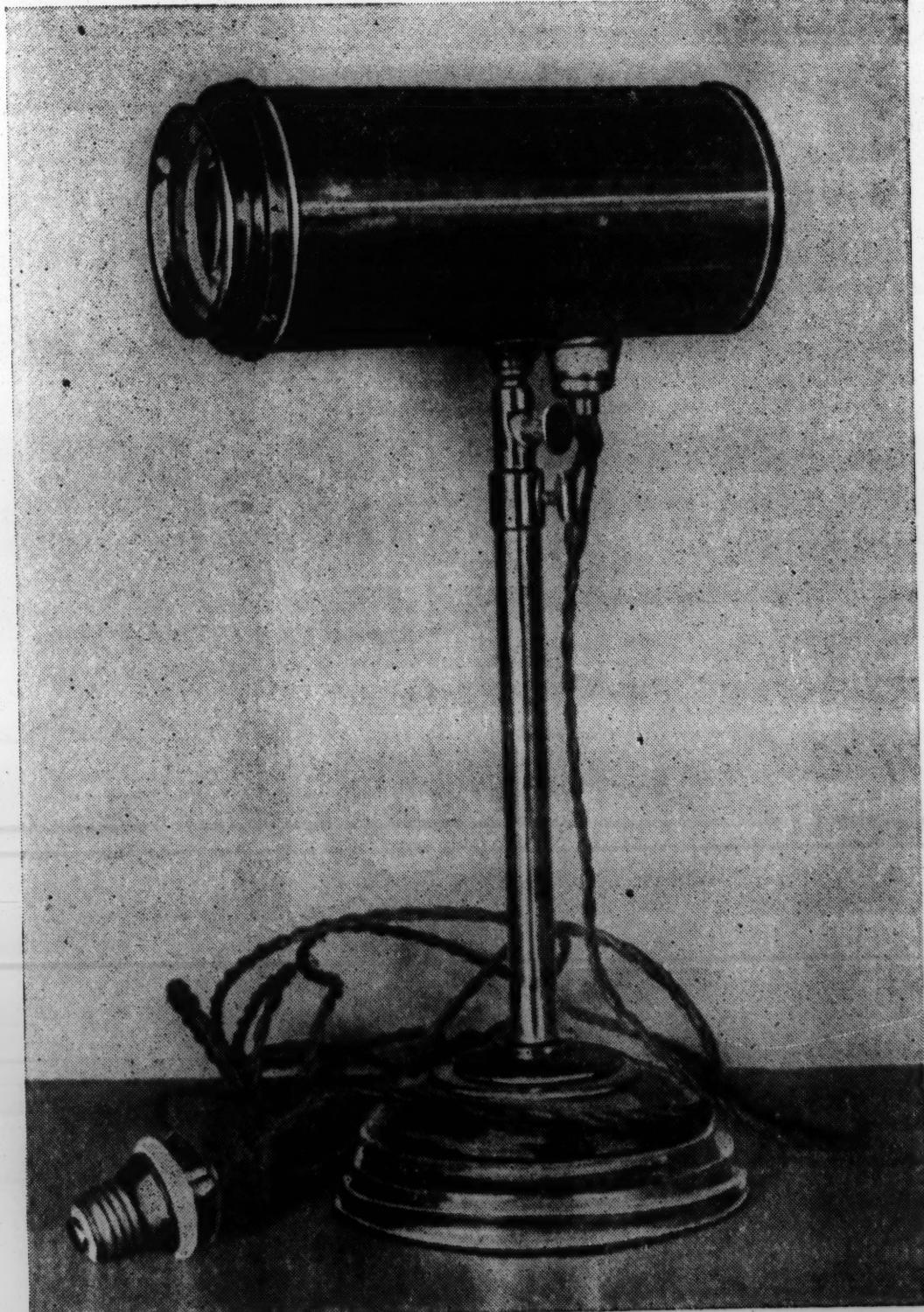
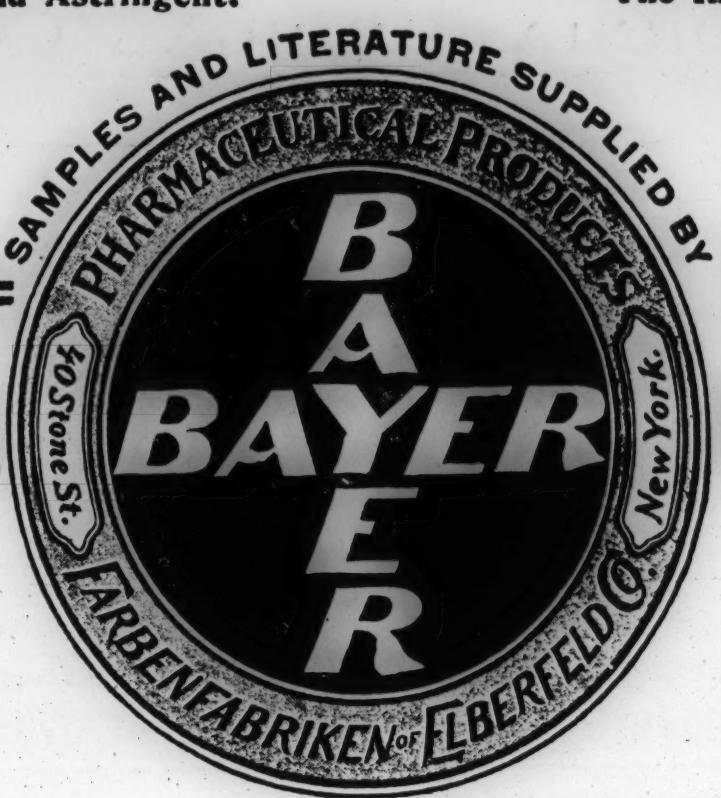
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CALIFORNIA MEDICAL JOURNAL.

The Treatment of Internal Hemorrhoids.

W. D. Bullard, New York, is of the opinion that there are only four well-recognized methods of operative interference worthy of the name. They are the injection method, the Whitehead or American operation, the ligature, and the clamp and cautery. The first two should be abandoned. The only value the injection method can possibly possess is its applicability in the case of patients who are dangerously ill, to whom an anesthetic cannot be administered. The risk, however, is too great, and it safer for the physician to adopt one of the palliative methods, such as suppositories, poultices, ice cloths and laxatives. The Whitehead method has no advantages. The ligature and the clamp and cautery operations are the proper proced-

ures to employ, the latter possessing the advantage of a more speedy and painless cure and less liability to complications. The ligatures may be caught by a lump of feces and torn off, considerable hemorrhage resulting, while in the author's experience, the sloughs from the clamp and cautery have never given rise to any secondary complications.—*Med. Record.*

As the season is at hand when typhoid fever usually prevails the attention of physicians is directed to the Merrell Co.'s advertisement of Solution Bismuth and Hydrasria which appears in this number of the "Journal." An article upon this subject, written by J. A. Knight, of Eatonton, Ga., was published in the Cincinnati Lancet Clinic a reprint of which will be sent to any physician upon request.

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